

Enrollment:
Purchaser Name: Annie Marie PARE

Phone Res: (289) 242-6435
Phone Bus:
Closing Date: November 09, 2023
Inspector: Gisella Fiore



Vendor / Builder:
Project: Zancor Oakville Ltd.
Lot / Phase: 810 / 1
Plan:
Address: 2450 Old Bronte Road, Suite 810
Municipality:
Inspection Date: October 31, 2023

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Please list below any damaged, incomplete, or missing items and anything that is not in good operating condition. Also note any (substitutions) of items referred to in, or to be selected under, the Agreement of Purchase and Sales (APS). Please initial all changes and deletions. As a minimum, check the following:

DAMAGED, INCOMPLETE OR MISSING

- Windows, side lights and other glazing. Window and door screens
- Bathtub sinks and toilets
- Bathroom accessories if provided
- Mirrors, counter tops and cabinetry
- Flooring (hardwood, vinyl, ceramic tiles, carpeting)
- Interior finished and trim carpentry
- Furnace
- Hot water heater, if provided (not rental)
- Exterior finished, driveways, walkways, decks and landscaping

OPERATING CONDITION

- Windows, interior and exterior doors. Door locks
- Faucets: Kitchen, bathroom, laundry room
- Exhaust fans (kitchen, bathrooms) if provided
- Electrical outlets and fixtures
- Gas fireplaces, incl. circulation fans, if provided
- Heat Recovery Ventilation system, if provided
- Heating system
- Hot water heater, if provided (not rental)
- Air conditioning system, if provided and if conditions permit

KITCHEN

CABINETS	CHIP AT UPPER VALANCE ABOVE SINK	_____	_____
	CHIP AT BOTTOM RIGHT CABINET BELOW SINK BY DW.	_____	_____
	CHIP AT BOTTOM CORNER FILLER RIGHT OF STOVE AND SHELF NOT INSTALLED IN CABINET RIGHT OF STOVE.	_____	_____
	VALANCE NOT FLIGHT AT CORNER LEFT OF SINK.	_____	_____
	DAMAGED FRIDGE PANEL FRIDGE RIGHT AND LEFT SIDE GABLE	_____	_____
	SECURE KICKPLATE BELOW FRIDGE.	_____	_____
	CHIP AT UPPER RIGHT CABINET ABOVE MICROWAVE.	_____	_____
	SCUFF ON GABLES RIGHT AND LEFT SIDE OF MICROWAVE.	_____	_____
NOTE:	BACKSPLASH OUTLETS THROUGHOUT AT KITCHEN TO BE ADJUSTED. AT BACKSPLASH NOT FLUSH	_____	_____

MASTER BEDROOM

WINDOWS	TRIM SHORT LEFT SIDE OF WINDOW.	_____	_____
	DENT ON MULIN BELOW OPERATING WINDOW.	_____	_____
NOTE:	OVER CUT AT CEILING SPRINKLER CAP INSIDE CLOSET	_____	_____

MASTER ENSUITE BATH

NOTE:	SHOWER GLASS NOT INSTALLED	_____	_____
FAUCETS/PLUMBING	PLUMBING NOT COMPLETE IN SHOWER DUE TO TILE REPLACEMENT	_____	_____

LIVING ROOM

NOTE:	HOMEOWNER UNHAPPY WITH WALL RIGHT OF SLIDING DOOR NOT STRAIGHT.	_____	_____
	ADJUST SLIDING DOOR MAKING NOISE.	_____	_____

MAIN BATHROOM

FAUCETS/PLUMBING	PLUMBING NOT COMPLETE INSIDE SHOWER.	_____	_____
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THE COMPLETED PRE-DELIVERY INSPECTION IS A FORMAL RECORD OF THE HOME'S CONDITION BEFORE THE PURCHASER TAKES POSSESSION IT WILL BE USED AS A REFERENCE FOR FUTURE WARRANTY REQUESTS.

** Purchasers or owners who intend to designate someone to conduct the PDI in their place should ensure they provide written authority to the vendor/builder authorizing the designate to sign this form on their behalf.*

I have inspected my new home and I agree that the description of the items listed on this form are accurate.

Annie Marie PARE

A handwritten signature in black ink, appearing to be "Annie Marie PARE".

Purchaser's Name (print)

Purchaser's Signature

Purchaser's Name (print)

Purchaser's Signature

Designate's Name (print)

Designate's Signature

Gisella Fiore

A handwritten signature in black ink, appearing to be "Gisella Fiore".

Inspector's Name (print)

Inspector's Signature

Date (YYYY/MM/DD)

2023/10/31

October 31, 2023